

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	VT	69607	9/17/00
O.I.P.E. CLASSIFIER		8	9-21-00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			
		60521	10-26-00

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	7/14/03
2	✓	✓	2/11/04
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
8	✓	✓	
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12	✓	✓	
13	✓	✓	
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48	✓	✓	
49	✓	✓	
50	✓	✓	

Claim	Final	Original	Date
51	✓	✓	7/14/03
52	✓	✓	2/11/04
53	✓	✓	
54	✓	✓	
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99	✓	✓	
100	✓	✓	

Claim	Final	Original	Date
101	✓	✓	7/14/03
102	✓	✓	2/11/04
103	✓	✓	
104	✓	✓	
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146	✓	✓	
147	✓	✓	
148	✓	✓	
149	✓	✓	
150	✓	✓	

BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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